

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Robert Margolis
Name

(2) 657 Juniper Pl
Address (number and street)
Wellington, FL 33414
City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

06-11-15A11:28 RCVD

(4) Check appropriate box(es):

☒ Candidate Office Sought: Mayor

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 05 / 01 / 15 To 05 / 31 / 15 Report Type: 2015 M5

☐ Original

☒ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , _____ . _____

Loans \$ _____ , _____ , 100 . 00

Total Monetary \$ _____ , _____ , 100 . 00

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 31 . 12

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 31 . 12

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 100 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 31 . 12

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Linda Margolis

☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

x Linda Margolis
Signature

(Type name) Robert Margolis

☒ Candidate ☐ Chairperson (only for PC and PTY)

x Robert Margolis
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Robert Margolis (2) I.D. Number _____

(3) Cover Period 05 / 01 / 15 through 05 / 31 / 15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
05/26 /15	Wells Fargo	Bank Charge	Mon		31.12
001	2205 St Rd 7 Wellington, FL 33414				
/ /					
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/ /					
/ /					
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